



PART B - FEE(S) TRANSMITTAL

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22884 7590 10/05/2005

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Diane M. Miles (Depositor's Name)
Diane M. Miles (Signature)
1-4-06 (Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/024,096	12/19/2001	Alejandro Mier-Langner	ZK524-02121	5164
TITLE OF INVENTION: ADDRESSABLE LIGHT FIXTURE MODULE				

APPL. TYPE	CLAIM ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$7400	\$0	\$7400	01/05/2006
EXAMINER	ART UNIT	CLASS-SUBCLASS			
WANG, QUAN ZHEN	2633	398-106000			

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

- ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.
☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/122; Rev. 09-02 or more recent) attached. Use of a Customer Number is required.

2. For printing on the patent front page, list

- (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,
(2) the name of a single firm (having as a member a registered attorney or agent) and the name of up to 2 registered patent attorneys or agents. If an issue is filed, no name will be printed.

1 John F. Salazar
2 Middleton Reutlinger
3

3. ASSIGNOR NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignor is identified below, an assignor data will appear on the patent. If an assignor is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is a substitute for filing an assignment.

(A) NAME OF ASSIGNOR

Genlyte Thomas Group LLC

(B) RESIDENCE (CITY and STATE OR COUNTRY)

Louisville, Kentucky

Please check the appropriate assignor category or categories (will not be printed on the patent): ☐ Individual ☒ Corporation or other private group entity ☐ Government

4a. The following fee(s) are enclosed:

- ☒ Issue Fee
☐ Publication Fee (No small entity discount permitted)
☒ Advance Order - # of Copies 10 (\$30)

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- ☐ A check in the amount of the fee(s) is enclosed.
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- ☐ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. ☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

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Authorized Signature

Typed or printed name John F. Salazar

Date 1-4-06

Registration No. 39,353

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FROM: John F. Salazar,
Registration No. 39,353
(faxed by Diane M. Miles, Paralegal)

Date: January 4, 2006

TO: U.S. Patent and Trademark Office
Fax #571-273-2885

Re: Issue fee payment for U.S. Patent Application No. 10/024,096
Attorney Docket No. ZK524-02121

PAGES: 4 in total

This facsimile is in response to the Notice of Allowance, mailed on Oct. 5, 2005, and includes:

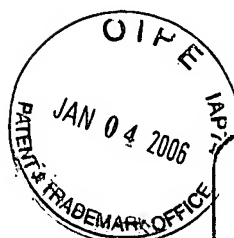
1. PTO/SB/21 (Transmittal Form);
2. PTOL-85, Part B Fee Transmittal; and
3. PTO-2038, Credit Card Payment Form.

CERTIFICATE OF TRANSMISSION UNDER 37 CFR §1.8

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Diane M. Miles
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TRANSMITTAL FORM	Application Number	10/024,096	
	Filing Date	12/18/2001	
	First Named Inventor	Alejandro Mier-Langner	
	Art Unit	2633	
	Examiner Name	Wang, Quan Zhen	
(to be used for all correspondence after initial filing)		Attorney Docket Number	ZK524-02121
Total Number of Pages in This Submission		4	

ENCLOSURES (Check all that apply)		
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): PTOL-85; PTO-2038; Facsimile Cover Sheet
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SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT	
Firm Name	Middleton Reutlinger
Signature	
Printed name	John F. Salazar
Date	1-4-06
Reg. No.	39,353

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Signature	
Typed or printed name	Diane M. Miles
Date	1-4-06

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